



DECLARATION and POWER OF ATTORNEY

PATENT (U.S.A.) ATTORNEY'S DOCKET NO. 83365.0001

ORIGINAL CONTINUATION DIVISIONAL

				DIVISIONAL			
or an o INFOR ADVER	elow named inventor, I declare that the triginal, first and joint inventor (if plur MATION DELIVERY SYSTEM, ADV TISEMENT INFORMATION DELIVE scification of which is attached hereto was filed on October 22,	al names are listed below) /ERTISEMENT DELIVERY ERY METHOD AND SAVE o unless the following box is	of the subject matt SYSTEM, INFOR! R PAGE DISPLAY s checked:	eve that I am the original, first a er which is claimed and for whi MATION DELIVERY PROGRAM METHOD	und sole inventor ich a patent is so M, SERVER, INF	ought on the invention en	titled:
l ackno l hereb l hereb	idence, post office address and citize whedge my duty to disclose informati y state that I have reviewed and und y claim foreign priority benefits unde ed below any foreign application for p	ion which is material to the lerstand the contents of the r Title 35, United States Co	patentability of this a above identified s ode, § 119 of any fo	pecification, including the clain preign application(s) for patent	ns, as amended or inventor's cer	by any amendment referi tificate listed below and h	ed to above.
	·		PRIOR FOREIGN	APPLICATION(S)		 	
	COUNTRY APPLICATION NUMBER			DATE OF FILING Month Day Year		PRIORITY CLAIMED UNDER 35 U.S.C. 119	
	JAPAN 2000-338734			11/07/2000		YES	
•	JAPAN 2001-026124			02/01/2001		YES	
	JAPAN 2001-200203			06/29/2001		YES	
this app duty to	y claim the benefit under Title 35, Ur offication is not disclosed in the prior of disclose information which is materia tion and the national or PCT internat	United States application in al to patentability as define	n the manner provided in Title 37, Code	ded by the first paragraph of Ti	tle 35, United St	ates Code § 112, I acknow	wledge the
[APPL'N NO.] [FIRST FIL			ING DATE)		[STATUS		
(Application Serial No.) (Filing			Date)		(Status		
	R OF ATTORNEY: As a named inve ademark Office connected therewith.		following attorney(s		26021	COPY O ORIGINA	in the Patent F PAPERS LLY FILED
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(Please	Print)					·	
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	Name of Inventor			Residence: CITY		STATE or COUNTRY	
3	Post Office Address					<u> </u>	CITIZENSHIP
4	Name of Inventor			Residence: CITY		STATE or COUNTRY	
	Post Office Address	-				<u> </u>	CITIZENSHIP
these s	r declare that all statements made he tatements were made with the know le United States Code, and that such	ledge that willful false state	ments and the like	so made are punishable by fin-	e or imprisonme	nt, or both, under Section	
SIGNATURE OF INVENTOR 1 ASSUMBATION SOLVETAIN				SIGNATURE OF INVENTOR 2			
DATE /2/57/200/				DATE			
				·			